The policy with regard to sale and distribution of alcohol is within the purview of the State Governments. Therefore, the efforts made to contain the damage done by alcoholism vary from State to State. The business of alcohol is a controlled one and without a licence issued by the respective State Government, no one can sell alcoholic beverages. Selling of alcoholic beverages to minors is prohibited. A high rate of State excise duty is levied to dissuade people from consuming alcohol. Advertisements of alcoholic beverages have been banned by the Government.

Apart from this, clinical care, building awareness, counselling and rehabilitation is made available through de-addiction centres and counselling centres run/funded by the Government.

Tobacco consumption by young women

*230. PROF. ALKA BALRAM KSHATRIYA:
SHRIMATI SHOBHANA BHARTIA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether WHO in its first report on global tobacco use and control efforts, has revealed that the use of tobacco by young women in India is rapidly increasing;

(b) if so, the facts and the details thereof;

(c) whether the steps taken by Government to control use of tobacco by citizens have not been proved effective; and

(d) if so, the reasons therefor and further strategies adopted to check the use of tobacco, which is affecting the lives of citizens?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) to (d) WHO report on Global Tobacco Epidemic 2008, has revealed rise in tobacco use among young women in high population countries. The report has projected the trend having portents of an ominous potential of an epidemic. The report also indicates that women smoke at about one fourth rate of men and tobacco industry is aggressively marketing to tap this potential. As per NFHS-3, data published in 2007,10.8% Women in India consume some form of tobacco.

Government of India has enacted a strong Tobacco Control Act, namely The Cigarettes and Other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act, 2003, which provides for the following:—

2. Prohibition of direct and indirect advertisement of all tobacco products.

3. Prohibition of smoking in a public place.

4. Prohibition of sale of all tobacco products to a person below the age of 18 years.

5. Prohibition of sale of all tobacco products within a radius of 100 yards of educational institutions.

Mandatory depiction of statutory warning (including pictorial warnings) on tobacco packs.

> Regulation of Nicotine and Tar Content (yet to be enforced).

State Governments are the implementing agencies for various provisions of the Act. As the implementation of the Act in various States is not to the desired level, the Central Government proposes strengthening the capacity of the States/Districts under a new National

programme for tooacco control. This programme envisages establishment of State/District Tobacco Control Cells, school health programme for bringing greater awareness; mass media/ IEC campaign, etc. The pilot phase of the programme has been launched in the year 2007-08 in 18 districts of 9 States.

Herbal treatment

t*231. SHRI RAJ MOHINDER SINGH MAJITHA: SHRI RAM JETHMALANI:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that treatment with herbs has been found effective in the country;

(c) whether it is also a fact that treatment through aforesaid system is cheaper as well as easy;

(b) if so, the reaction of Government thereto; and

(d) whether Government has formulated any scheme to make this system of medicine more effective and if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) to (d) Ayurveda, Yoga, Siddha and Unani are ancient but holistic healthcare systems with proven efficacy for treatment of various disorders.

There is global resurgence of interest in traditional medicinal systems and herbal remedies all over the world including India. National Health Policy, 1983, suggested initiation of measures to enable various systems of Indian Medicine and Homoeopathy to be developed in accordance with their genius and their integration at the appropriate levels, within specified areas of responsibility and functioning in the overall healthcare delivery systems, especially in regard to the preventive, promotive and public health objectives.

In accordance with these objectives, Government of India has provided full support for the development of Indian Systems of Medicine and Homoeopathy. Pharmacopoeia Committees, Pharmacopoeia! Laboratories, Research Institutions and National Institutes have been set up for Ayurveda, Siddha, Unani, Homoeopathy, Yoga and Naturopathy systems. Various Central Sector and Centrally Sponsored Schemes have been initiated for laying down of pharmacopoeial standards, standardization and quality control of AYUSH products, development and upgradation of AYUSH education. In addition to research by AYUSH Research Councils, research under Extra Mural Research Projects and Golden Triangle Partnership Projects on traditional medicine have been launched by Department of AYUSH in collaboration with CSIR and JCMR for scientific validation of AYUSH drugs and drugless therapies. Assistance is also being provided to State Governments for opening of AYUSH units at the District Hospital/CHCs/PHCs level for integration of AYUSH in national healthcare delivery.

National Medicinal Plants Board has also been set up to promote cultivation and conservation of medicinal plants. New initiatives have been launched in the Eleventh Plan for providing assistance to Ayurveda, Siddha, Unani and Homoeopathy manufacturing units to establish in-house quality control laboratories and setting up of common facilities for AYUSH industry clusters, assistance to centres of excellence engaged in AYUSH research, public health and revitalization of local health traditions.

t Original notice of the question was received in Hindi.